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**United States Bankruptcy Court**  
**District of Puerto Rico, San Juan Division**

IN RE:

Case No. \_\_\_\_\_

**ORTIZ, JOSE CELSO MARTINEZ**Chapter **13**

Debtor(s)

**CHAPTER 13 PAYMENT PLAN**

1. The future earnings of the Debtor(s) are submitted to the supervision and control of the Trustee and the Debtor(s) shall make payments to the Trustee ☐ directly ☐ by payroll deductions as hereinafter provided in the PAYMENT PLAN SCHEDULE.
2. The Trustee shall distribute the funds so received as hereinafter provided in the DISBURSEMENT SCHEDULE.

PLAN DATED: <b>5/06/2016</b> <input type="checkbox"/> AMENDED PLAN DATED: _____ <input checked="" type="checkbox"/> PRE <input type="checkbox"/> POST-CONFIRMATION Filed by: <input type="checkbox"/> Debtor <input type="checkbox"/> Trustee <input type="checkbox"/> Other	
<b>I. PAYMENT PLAN SCHEDULE</b>  \$ <b>375.00</b> x <b>60</b> = \$ <b>22,500.00</b> \$ _____ x _____ = \$ _____ \$ _____ x _____ = \$ _____ \$ _____ x _____ = \$ _____ \$ _____ x _____ = \$ _____  <p style="text-align: right;">TOTAL: \$ <b>22,500.00</b></p> Additional Payments: \$ _____ to be paid as a LUMP SUM within _____ with proceeds to come from:  <input type="checkbox"/> Sale of Property identified as follows: _____ <input type="checkbox"/> Other: _____  Periodic Payments to be made other than, and in addition to the above: \$ _____ x _____ = \$ _____	<b>II. DISBURSEMENT SCHEDULE</b>  A. ADEQUATE PROTECTION PAYMENTS OR _____ \$ _____ B. SECURED CLAIMS: <input type="checkbox"/> Debtor represents no secured claims. <input checked="" type="checkbox"/> Creditors having secured claims will retain their liens and shall be paid as follows: 1. <input type="checkbox"/> Trustee pays secured ARREARS: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 2. <input checked="" type="checkbox"/> Trustee pays IN FULL Secured Claims: Cr. <b>Scotiabank De Puert</b> Cr. _____ Cr. _____ # <b>7532510017012441</b> # _____ # _____ \$ <b>12,940.00</b> \$ _____ \$ _____ 3. <input type="checkbox"/> Trustee pays VALUE OF COLLATERAL: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 4. <input type="checkbox"/> Debtor SURRENDERS COLLATERAL to Lien Holder: _____ 5. <input type="checkbox"/> Other: _____ 6. <input type="checkbox"/> Debtor otherwise maintains regular payments directly to: _____ C. PRIORITIES: The Trustee shall pay priorities in accordance with the law. 11 U.S.C. § 507 and § 1322(a)(2) D. UNSECURED CLAIMS: Plan <input type="checkbox"/> Classifies <input checked="" type="checkbox"/> Does not Classify Claims. 1. (a) Class A: <input type="checkbox"/> Co-debtor Claims / <input type="checkbox"/> Other: _____ <input type="checkbox"/> Paid 100% / <input type="checkbox"/> Other: _____ Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 2. Unsecured Claims otherwise receive PRO-RATA disbursements.  OTHER PROVISIONS: <i>(Executory contracts; payment of interest to unsecureds, etc.)</i> <b>* Debtor(s) to provide ADEQUATE PROTECTION PAYMENTS to Scotiabank thru the Trustee in the sum \$200.00 per month until confirmation.</b> <b>* Debtor to provide auto insurance (Eastern America Insurance Company) upon maturity to Scotiabank through Chapter 13 Plan.</b>
<b>III. ATTORNEY'S FEES</b> (Treated as § 507 Priorities)  Outstanding balance as per Rule 2016(b) Fee Disclosure Statement: \$ <b>2,868.00</b>	
Signed: <u>/s/ JOSE CELSO MARTINEZ ORTIZ</u> Debtor  _____ Joint Debtor	
PROPOSED BASE: \$ <b>22,500.00</b>	

Attorney for Debtor **RFiguerola Carrasquillo Law Office PSC**Phone: **(787) 744-7699**